

Please type a plus sign (+) inside this box → ☒

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/05 (08-00)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No. 1924DIV3CON2
First Inventor Keith L. Milliman et al
Title SURGICAL STAPLING APPARATUS
Express Mail Label No. ET710029918US

APPLICATION ELEMENTS

See MPEP chapter 600 concerning utility patent application contents.

1. ☒ Fee Transmittal Form (e.g., PTO/SB/17)
(Submit an original and a duplicate for fee processing)
2. ☐ Applicant claims small entity status.
See 37 CFR 1.27.
3. ☒ Specification [Total Pages 31]
(preferred arrangement set forth below)
 - Descriptive title of the invention
 - Cross Reference to Related Applications
 - Statement Regarding Fed sponsored R & D
 - Reference to sequence listing, a table, or a computer program listing appendix
 - Background of the Invention
 - Brief Summary of the Invention
 - Brief Description of the Drawings (if filed)
 - Detailed Description
 - Claim(s)
 - Abstract of the Disclosure
4. ☒ Drawing(s) (35 U.S.C. 113) [Total Sheets 39]
5. Oath or Declaration [Total Pages 4]
 - a. ☐ Newly executed (original or copy)
Copy from a prior application (37 CFR 1.63 (d))
 - b. ☒ (for continuation/divisional with Box 17 completed)
 - i. ☐ **DELETION OF INVENTOR(S)**
Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).
6. ☐ Application Data Sheet. See 37 CFR 1.76

ADDRESS TO:

Assistant Commissioner for Patents
Box Patent Application
Washington, DC 20231

7. ☐ CD-ROM or CD-R in duplicate, large table or Computer Program (Appendix)
8. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)
 - a. ☐ Computer Readable Form (CRF)
 - b. Specification Sequence Listing on:
 - i. ☐ CD-ROM or CD-R (2 copies); or
 - ii. ☐ paper
 - c. ☐ Statements verifying identity of above copies

ACCOMPANYING APPLICATION PARTS

9. ☐ Assignment Papers (cover sheet & document(s))
10. ☐ 37 CFR 3.73(b) Statement (when there is an assignee) ☒ Power of Attorney
11. ☐ English Translation Document (if applicable)
12. ☐ Information Disclosure Statement (IDS)/PTO-1449 ☐ Copies of IDS Citations
13. ☐ Preliminary Amendment
14. ☒ Return Receipt Postcard (MPEP 503) (Should be specifically itemized)
15. ☐ Certified Copy of Priority Document(s) (if foreign priority is claimed)
16. ☒ Other: Certificate of Express Mailing

17. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in a preliminary amendment, or in an Application Data Sheet under 37 CFR 1.76:

☒ Continuation ☐ Divisional ☐ Continuation-in-part (CIP)

of prior application No.: 10 / 014,004

Prior application information:

Examiner Scott Smith

Group / Art Unit: 3721

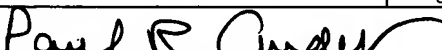
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.

18. CORRESPONDENCE ADDRESS

☐ Customer Number or Bar Code Label

or ☒ Correspondence address below

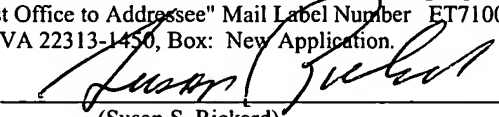
Name	Paul R. Audet				
Address	United States Surgical, a Division of Tyco Healthcare Group LP				
	150 Glover Avenue				
City	Norwalk	State	Connecticut	Zip Code	06856
Country	U.S.	Telephone	(203) 845-1480	Fax	(203) 845-4266

Name (Print/Type)	Paul R. Audet	Registration No. (Attorney/Agent)	26,439
Signature			Date 11/03/03

CERTIFICATION UNDER 37 C.F.R. § 1.10

I hereby certify that this correspondence and the documents referred to as enclosed are being deposited with the United States Postal Service on date below in an envelope as "Express Mail Post Office to Addressee" Mail Label Number ET710029918 US addressed to: U.S. Patent and Trademark Office, P.O. Box 1450, Alexandria, VA 22313-1450, Box: New Application.

Dated: 11/3/03


(Susan S. Rickard)

17510 US PTO
10/700250
110303

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMITTAL for FY 2001

Patent fees are subject to annual revision.

Compl te if Known

Application Number	To Be Assigned
Filing Date	Concurrently Herewith
First Named Inventor	Keith L. Milliman et al
Examiner Name	Scott Smith
Group Art Unit	3721
Attorney Docket No.	1924DIV3CON2 (203-2145DIV3CON2)

TOTAL AMOUNT OF PAYMENT (\$ 740.00

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Deposit Account Number 21-0550
Deposit Account Name United States Surgical

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17

☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION

1. BASIC FILING FEE

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 710	201 355	Utility filing fee	\$740.00
106 320	206 160	Design filing fee	
107 490	207 245	Plant filing fee	
108 710	208 355	Reissue filing fee	
114 150	214 75	Provisional filing fee	

SUBTOTAL (1) (\$ 740.00

2. EXTRA CLAIM FEES

Total Claims	Extra Claims	Fee from below	Fee Paid
8	-20** = 0	X 18	= \$0
1	-3** = 0	X \$84	= \$0
Multiple Dependent		\$280	= \$0

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 80	202 40	Independent claims in excess of 3
104 270	204 135	Multiple dependent claim, if not paid
109 80	209 40	** Reissue independent claims over original patent
110 18	210 9	** Reissue claims in excess of 20 and over original patent

SUBTOTAL (2) (\$ 0.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)

3. ADDITIONAL FEES

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	\$0
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	\$0
139 130	139 130	Non-English specification	\$0
147 2,520	147 2,520	For filing a request for ex parte reexamination	\$0
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	\$0
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	\$0
115 110	215 55	Extension for reply within first month	\$0
116 390	216 195	Extension for reply within second month	\$0
117 890	217 445	Extension for reply within third month	\$0
118 1,390	218 695	Extension for reply within fourth month	\$0
128 1,890	228 945	Extension for reply within fifth month	\$0
119 310	219 155	Notice of Appeal	\$0
120 310	220 155	Filing a brief in support of an appeal	\$0
121 270	221 135	Request for oral hearing	\$0
138 1,510	138 1,510	Petition to institute a public use proceeding	\$0
140 110	240 55	Petition to revive - unavoidable	\$0
141 1,240	241 620	Petition to revive - unintentional	\$0
142 1,240	242 620	Utility issue fee (or reissue)	\$0
143 440	243 220	Design issue fee	\$0
144 600	244 300	Plant issue fee	\$0
122 130	122 130	Petitions to the Commissioner	\$0
123 50	123 50	Petitions related to provisional applications	\$0
126 240	126 240	Submission of Information Disclosure Stmt	\$0
581 40	581 40	Recording each patent assignment per property (times number of properties)	\$0
146 710	246 355	Filing a submission after final rejection (37 CFR § 1.129(a))	\$0
149 710	249 355	For each additional invention to be examined (37 CFR § 1.129(b))	\$0
179 710	279 355	Request for Continued Examination (RCE)	\$0
169 900	169 900	Request for expedited examination of a design application	\$0
Other fee (specify) 0			\$0

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$ 0.00

SUBMITTED BY

Name (Print/Type)	Paul R. Audet	Registration No. (Attorney/Agent)	26,439	Telephone	(203) 845-1480
Signature	<i>Paul R. Audet</i>	Date	11/03/03		

CERTIFICATION UNDER 37 C.F.R. § 1.10

I hereby certify that this correspondence and the documents referred to as enclosed are being deposited with the United States Postal Service on date below in an envelope as "Express Mail Post Office to Addressee" Mail Label Number E7770029918US addressed to: U.S. Patent and Trademark Office, P.O. Box 1450, BOX: Alexandria, VA 22314-1450, Attn: Box: New Application

Dated: 11/3/03

(Susan S. Rickard)

Docket No. 1924DIV3CON

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Keith L. Milliman, et al
Serial No.: To Be Assigned Filed: Concurrently Herewith
Examiner: Scott Smith Group: 3721
For: **SURGICAL STAPLING APPARATUS**

U.S. Patent & Trademark Office
PO Box 1450
Alexandria, VA 22313-1450
MailStop PATENT APPLICATION

CERTIFICATE OF EXPRESS MAILING

"Express Mail" Mailing Label No.: ET 710029918US

Date of Deposit: November 3, 2003

I hereby certify that the following:

- ☒ This Certificate of Mailing
- ☒ Application Transmittal Letter (1 page)
- ☒ Fee Transmittal for FY 2001 (1 page)
- ☒ Application (31 pages including specification, claims and abstract)
- ☒ 39 sheets of drawings (formal)
- ☒ Copy of Combined Declaration and Power of Attorney (4 pages)
- ☒ Copy of Revocation and Power of Attorney (2 pages)
- ☒ Return Postcard

are being deposited with the United States Postal Services under 37 CFR Section 1/10 on the Date of Deposit indicated above in an envelope as "Express Mail Post Office to Addressee" Mail Label Number ET7100299918 US addressed to the U.S. Patent & Trademark Office, PO Box 1450, Alexandria, VA 22202-1450, Mail Stop PATENT APPLICATION.


Susan S. Rickard

U.S. Surgical, a division of
TYCO HEALTHCARE GROUP LP
150 Glover Avenue
Norwalk, Connecticut 06856
(203) 845-4489